Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Desc Main Document Page 1 of 73

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MISSOURI, JEFFERSON CITY DIVISION	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	James First name Lee Middle name	Kristina First name Ann Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Weston Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3457	xxx-xx-3628

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Debtor 1 Debtor 2

Weston, James Lee & Weston, Kristina Ann

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	6300 N Wagon Trail Rd	If Debtor 2 lives at a different address:
		Columbia, MO 65202-7493 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Boone County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		Explain. (See 28 U.S.C. § 1408.)	Explain. (See 28 U.S.C. § 1408.)

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Debtor	1	
70htor	2	

Weston, James Lee & Weston, Kristina Ann

Case number (if known)

7.	The chapter of the Bankruptcy Code you are			rief description of each, see Ane top of page 1 and check the			§ 342(b) for Individual	s Filing for Bankruptcy (Form		
	choosing to file under	■ Ch	apter 7							
		□ Chapter 11								
			apter 12							
		☐ Ch	apter 13							
8.	How you will pay the fee	i I	about how you	he entire fee when I file my petition. Please check with the clerk's office in your local court for more detail you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money ney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a address						
				the fee in installments. If ynstallments (Official Form 103		this option, sign a	nd attach the Application	on for Individuals to Pay The		
			Ū	•	,	his option only if y	ou are filing for Chapter	7. By law, a judge may, but is		
		,	our family siz	o, waive your fee, and may do te and you are unable to pay t Chapter 7 Filing Fee Waived (0	he fee in in	stallments). If you	choose this option, you	ial poverty line that applies to unust fill out the Application		
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes								
			District	Eastern District of Missouri	When	8/31/17	Case number	17-20267		
			District	Western District of Missouri	— When	2/06/12	Case number	12-20119		
			District	missouri	When		Case number			
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by	■ No								
	an affiliate?		Debtor				Relationship to y	7011		
			District		When		Case number, if			
			Debtor				Relationship to y	-		
			District		When		Case number, if			
	Do you rent your	■ No.	Go to I	ine 12.						
11.	residence?			ur landlord obtained an evict	ion judama	ent against vou?				
11.		V^^		ar randiora obtainiou an EVICE	ivii jaagilli	on against you:				
11.		☐ Yes	. Has yo	No. Go to line 12.	, 0					

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Dahtand		Document	Page 4 of 73	
Debtor 1 Debtor 2	Weston, James Lee & Weston, Kristina	a Ann		Case number (if known)

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, Sta	ate & ZIP Code
	to this petition.			ox to describe your business:
				ness (as defined in 11 U.S.C. § 101(27A))
			_ •	I Estate (as defined in 11 U.S.C. § 101(51B))
			_ ,	defined in 11 U.S.C. § 101(53A))
			_ ,	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	If you indicate that you are a s, cash-flow statement, and for	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and I dder Subchapter V of Chapter 11.
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
4.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?	
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	

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Debtor 1 Debtor 2

Weston, James Lee & Weston, Kristina Ann

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor	1
Johtor	2

Weston, James Lee & Weston, Kristina Ann

Case number (if known)

16.	What kind of debts do you have?		Are your debts primarily consindividual primarily for a personal			e defined in 11 U.S.C.§ 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consume	er debts or busir	ness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is		I am filing under Chapter 7. Do y paid that funds will be available to			roperty is excluded and administrative expenses are		
	excluded and administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		■ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000		
	you estimate that you owe?	50-99		5001-10,000)	50,001-100,000		
		☐ 100-19 ☐ 200-99		□ 10,001-25,0	00	☐ More than100,000		
19.	How much do you	■ \$0 - \$5	50,000	□ \$1,000,001 ·	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 □ \$100,000,000				
20.	How much do you estimate your liabilities to	□ \$0 - \$5		□ \$1,000,001 ·		□ \$500,000,001 - \$1 billion		
	be?		01 - \$100,000 01 - \$500,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$1 million	□ \$100,000,00				
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		case can r			to 20 years, or	by or property by fraud in connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. , Kristina Ann		
		James L	ee Weston of Debtor 1		Kristina An Signature of I	nn Weston		
		Executed	on March 5, 2020 MM / DD / YYYY		Executed on	March 5, 2020		

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Email address

brian@baehrwiggins.com

0400 20 20	Document Pag	ge 7 of 73	2/20 12: 10:01 B000 Main
Debtor 1 Debtor 2 Weston, James L	ee & Weston, Kristina Ann	Cas	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, Chapter 7, 11, 12, or 13 of title 11, United States Code person is eligible. I also certify that I have delivered to	, and have explained	the relief available under each chapter for which the
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have no knot petition is incorrect.	owledge after an inqui	ry that the information in the schedules filed with the
	/s/ JBrian Baehr	Date	March 5, 2020
	Signature of Attorney for Debtor		MM / DD / YYYY

JBrian Baehr

47272 Bar number & State

Baehr Wiggins PC

1900 N Providence Rd # 205 Columbia, MO 65202-3710 Number, Street, City, State & ZIP Code Contact phone (573) 290-2727

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Missouri, Jefferson City Division

In	re Weston, James Lee & Weston, Kristina Ann		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	ORNEY FOR D	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received			1,000.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compe firm.	ensation with any other persor	n unless they are mer	nbers and associates of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	cts of the bankruptcy	case, including:
	a. Analysis of the debtor's financial situation, and renderb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of creditord. [Other provisions as needed]	ement of affairs and plan whic	ch may be required;	
6.	By agreement with the debtor(s), the above-disclosed fee Representation in any adversary proceed			
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any is bankruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the debtor(s) in
	March 5, 2020	/s/ JBrian Baehr		
	Date	JBrian Baehr		
		Signature of Attorna Baehr Wiggins P		
		1900 N Providen Columbia, MO 65 (573) 200-2727		7
		brian@baehrwig		
		Name of law firm		

Acceptance Now 5501 Headquarters Dr Plano, TX 75024-5837

Amazon PO Box 965015 Orlando, FL 32896-5015

American First Finance 3515 N Ridge Rd Ste 200 Wichita, KS 67205-1206

AR Resources Inc. PO Box 1056 Blue Bell, PA 19422-0287

AT&T
Attn: Bankruptcy
208 S Akard St
Dallas, TX 75202-4295

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899-8803

Becket and Lee LLP PO Box 3001 Malvern, PA 19355-0701

Belk/SYNCB PO Box 965028 Orlando, FL 32896-5028 Boone Convenient Care 601 Business Loop 70 W Suite 275 Columbia, MO 65203

Boyce & Bynum PO Box 7406 Columbia, MO 65205-7406

Capital One Bank PO Box 30281 Salt Lake City, UT 84130-0281

Cavalry Portfolio Services 500 Summit Lake Dr Ste 4A Valhalla, NY 10595-2323

CBNA
PO Box 6497
Sioux Falls, SD 57117-6497

Celtic Card Services 268 S State St Ste 300 Salt Lake City, UT 84111-5314

Central Bank PO Box 779 Jefferson City, MO 65102-0779

Central Missouri Dermatology 401 N Keene St Columbia, MO 65201-6625 Clark L Jones 11 N 7th St Columbia, MO 65201-4423

ConServe 200 Cross Keys Office Park Fairport, NY 14450-3510

Credit One Bank PO Box 98873 Las Vegas, NV 89193-8873

Creditors Bankruptcy Service PO Box 800849 Dallas, TX 75380-0849

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773-9635

Dish Network 9601 S Meridian Blvd Englewood, CO 80112-5905

ECMC PO Box 16408 Saint Paul, MN 55116-0408

Fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303-0820 Gap/SYNCB PO Box 965005 Orlando, FL 32896-5005

Goody's PO Box 182789 Columbus, OH 43218-2789

Healthport 925 N Point Pkwy Ste 350 Alpharetta, GA 30005-5214

Indigo PO Box 4499 Beaverton, OR 97076-4499

JC Penney PO Box 965007 Orlando, FL 32896-5007

Jefferson Bank of Missouri 700 Southwest Blvd Jefferson City, MO 65109-2660

Jefferson Capital Systems PO Box 7999 Saint Cloud, MN 56302-7999

JH Portfolio Debt Equities 5757 Phantom Dr Ste 225 Hazelwood, MO 63042-2429

Kim G. Schwartzkopf 2600 Forum Blvd Ste A Columbia, MO 65203-6343

Kohl's PO Box 3115 Milwaukee, WI 53201-3115

LTD Commodities 2800 Lakeside Dr Deerfield, IL 60015-1246

Macy's PO Box 8218 Mason, OH 45040-8218

Maurices PO Box 182125 Columbus, OH 43218-2125

Merrick Bank PO Box 9201 Old Bethpage, NY 11804-9001

Mid Missouri Anesthesia Consultants 1445 Christy Dr Jefferson City, MO 65101-2853

Milestone Mastercard PO Box 4477 Beaverton, OR 97076-4401 Moberly Regional Medical Center 1515 Union Ave Moberly, MO 65270-9407

MOHELA 633 Spirit Dr Chesterfield, MO 63005-1243

Montgomery Ward 1112 7th Ave Monroe, WI 53566-1364

Nebraska Furniture Mart PO Box 3456 Omaha, NE 68103-0456

New Egg/SYNCB PO Box 965036 Orlando, FL 32896-5036

Noble Finance 1107 Business Loop 70 East Columbia, MO 65201

Northeast Missouri Health Council 1416 Crown Dr Kirksville, MO 63501-2548

Old Navy PO Box 965036 Orlando, FL 32896-5036 PayPal PO Box 965005 Orlando, FL 32896-5005

Portfolio Recovery Associates 120 Corporate Blvd Ste 100 Norfolk, VA 23502-4952

Premier Bankcard 601 S Minesota Ave Sioux Falls, SD 57104

Progressive Leasing 256 W Data Dr Draper, UT 84020-2315

RTO Rentals PO Box 489 Paris, TN 38242-0489

Security Finance Central Bankruptcy PO Box 1893 Spartanburg, SC 29304-1893

Seventh Avenue 1515 21st St Monroe, WI 53566-3047

Steven Jones DDS 108 Scenic Dr Glasgow, MO 65254-9431 Stoneberry PO Box 2820 Monroe, WI 53566-8020

TJ Max/SNYCB PO Box 965005 Orlando, FL 32896-5005

Tower Loan
PO Box 320001
Flowood, MS 39232-0001

United Credit Union PO Box 858 Mexico, MO 65265-0858

United Student Aid Funds, Inc. PO Box 8961 Madison, WI 53708-8961

University Healthcare PO Box 807003 Kansas City, MO 64180-7003

University Hospital & Clinics 1 Hospital Dr Columbia, MO 65201-5276

University Physicians PO Box 808945 Kansas City, MO 64180-8945 VW Credit PO Box 9013 Addison, TX 75001-9013

Wal-Mart PO Box 965024 Orlando, FL 32896-5024

West Creek Financial PO Box 5518 Glen Allen, VA 23058-5518

World Finance PO Box 6429 Greenville, SC 29606-6429

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Desc Main Document Page 18 of 73 United States Bankruptcy Court Western District of Missouri, Jefferson City Division

IN RE:		Case No
Weston, James Lee & Westor	n, Kristina Ann	Chapter 7
	Debtor(s)	
	VERIFICATION OF MAILING	G MATRIX
	hereby verifies that the attached list of credit ddress of my ex-spouse (if any).	tors is true and correct to the best of my knowledge
Date: March 5, 2020	/s/ Weston, James Lee	
	Debtor	
	/s/ Weston, Kristina Ann	
	Joint Debtor, if any	

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Fill in th	his information to identi	fy your case:		
Debtor 1	James Lee West	on		
	First Name	Middle Name	Last Name	
Debtor 2	Kristina Ann Wes	ston		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSO	ON CITY
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,895.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,895.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	128,435.00
	Your total liabilities	\$	128,435.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,586.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,500.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your or	ther schedu	ules.
	■ Yes		

- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

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Debto	\r 1	S Comments		
Debto		Weston, James Lee & Weston, Kristina Ann Case number (if known)		
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box court with your other schedules.	and submit this form to the	
		m the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$5,174.00	

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	Fill in t	nis information to identify y	our case and this filing:		
Debto	or 1	James Lee Weston			
		First Name	Middle Name Last Name		
Debto		Kristina Ann Westo			
(Spous	e, if filing)	First Name	Middle Name Last Name		
Unite	d States B		ESTERN DISTRICT OF MISSOURI, JEFFERSON CITY		
Casa	number				☐ Check if this is an
Case	Humber				☐ Check if this is an amended filing
Offi	cial Fo	orm 106A/B			
Scl	hedu	le A/B: Prope	rty		12/15
think it inform Answe	fits best. I ation. If mo r every que	Be as complete and accurate a re space is needed, attach a sestion.	ems. List an asset only once. If an asset fits in more than ones possible. If two married people are filing together, both are eparate sheet to this form. On the top of any additional pages and, or Other Real Estate You Own or Have an Interest In	e equally responsible for sup	plying correct
					
1. Do y	ou own or	have any legal or equitable int	erest in any residence, building, land, or similar property?		
	No. Go to Pa	art 2.			
	es. Where	is the property?			
	_				
Part 2	Describe	e Your Vehicles			
			ole interest in any vehicles, whether they are registere to report it on Schedule G: Executory Contracts and Unex		cles you own that
SUITIEU	ile eise uil	ves. Il you lease a verilcie, als	o report it on scriedule G. Executory Contracts and Oriex	pireu Leases.	
3. Ca ı	rs, vans, t	rucks, tractors, sport utility	vehicles, motorcycles		
п.	.1-				
• \	res .				
3.1	Make:	Chevrolet	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Uplander	☐ Debtor 1 only	Creditors Who Have Clair	
	Year:	2008	☐ Debtor 2 only	Current value of the	Current value of the
	Approxima	ate mileage: 15500	0 ■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info		☐ At least one of the debtors and another		
	Salvage	Title			
			Check if this is community property (see instructions)	\$600.00	\$600.00
		Cord		Do not deduct secured cla	aims or exemptions. Put
3.2	Make:	Ford	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
	Model:	Fusion	Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	2010	Debtor 2 only	Current value of the	Current value of the
	Approxima	ate mileage: 10300	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	rmation:	At least one of the debtors and another		
				¢2 500 00	¢2 500 00
			☐ Check if this is community property (see instructions)	\$2,500.00	\$2,500.00

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Page 22 of 73 Document Debtor 1 Weston, James Lee & Weston, Kristina Ann Case number (if known) Debtor 2 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$3,100.00 .you have attached for Part 2. Write that number here.....>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$3,000.00 Household Goods, Furnishings & Appliances 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$1,000.00 Personal & Household Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$500.00 12 GA Shotgun, 9mm Pistol & .45 Pistol 11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

Π Nο

Yes. Describe.....

Clothing

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

□ No

Yes. Describe.....

\$750.00 Wedding Rings

\$500.00

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Desc Main Page 23 of 73 Document Debtor 1 Weston, James Lee & Weston, Kristina Ann Case number (if known) Debtor 2 \$20.00 Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$5,770.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash on hand \$25.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking Account at County Bank \$1,000.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

☐ Yes. List each account separately.

Type of account: Institution name:

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Desc Main Page 24 of 73 Document Debtor 1 Weston, James Lee & Weston, Kristina Ann Case number (if known) Debtor 2 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

□ No

Yes. Name the insurance company of each policy and list its value.

Company name: Surrender or refund Beneficiary: value: **James Weston** State Farm \$0.00 **Kristina Weston** \$0.00 State Farm

Official Form 106A/B Schedule A/B: Property page 4

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	tor 1 tor 2 Weston, James Lee & Weston, Kristina Ann Case number (if known)	
•	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive p died. No Yes. Give specific information	property because someone has
_	2 res. Give openine information.	
•	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
•	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to so No Yes. Describe each claim	et off claims
35.	Any financial assets you did not already list	
	I No	
	Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$1,025.00
Part	5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	to you own or have any legal or equitable interest in any business-related property?	
_	No. Go to Part 6.	
	Yes. Go to line 38.	
Part	If you own or have an interest in farmland, list it in Part 1.	
46. l	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7.	
	Yes. Go to line 47.	
	La res. Go to line 47.	
Part	7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
_	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No	
	Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Part	8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$0.00
56.	Part 2: Total vehicles, line 5 \$3,100.00	
57.	Part 3: Total personal and household items, line 15 \$5,770.00	
58.	Part 4: Total financial assets, line 36 \$1,025.00	
59.	Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
61.	Part 7: Total other property not listed, line 54 + \$0.00	
62.	Total personal property. Add lines 56 through 61 \$9,895.00 Copy personal property to	sal \$9,895.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	\$9,895.00

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Debtor 1 Debtor 2

Weston, James Lee & Weston, Kristina Ann

Case number (if known)

Official Form 106A/B Schedule A/B: Property page 6

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Fill in th	is information to identif	y your case:			
Debtor 1 James Lee Weston					
	First Name	Middle Name	Last Name		
Debtor 2	Kristina Ann Wes	ston			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSON CITY		
Case number (if known)					

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	Claim as Exempt
---------	--------------	--------------	-----------------

1.	Which set of exemptions are	you claiming? Check of	one only, even if	your spouse is filing with y	ou.
----	-----------------------------	------------------------	-------------------	------------------------------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Chevrolet Uplander 2008 155000 Line from Schedule A/B 3.1	\$600.00		\$600.00 100% of fair market value, up to any applicable statutory limit	RSMo § 513.430.1(5)
Ford Fusion	\$2,500.00	•	\$2,500.00	RSMo § 513.430.1(5)
2010 103000 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
Household Goods, Furnishings & Appliances	\$3,000.00		\$3,000.00	RSMo § 513.430.1(1)
Line from Schedule A/B. 6.1			100% of fair market value, up to any applicable statutory limit	
Personal & Household Electronics Line from Schedule A/B 7.1	\$1,000.00	•	\$1,000.00	RSMo § 513.430.1(1)
Ello Holli dolloddio 742 111			100% of fair market value, up to any applicable statutory limit	

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	btor 1 btor 2 Weston, James Lee & Weston,	Kristina Ann		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	12 GA Shotgun, 9mm Pistol & .45 Pistol	\$500.00		\$500.00	RSMo § 513.430.1(12)
	Line from Schedule A/B 10.1			100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B. 11.1	\$500.00		\$500.00	RSMo § 513.430.1(1)
	Line non schedule ALL TT.T			100% of fair market value, up to any applicable statutory limit	
	Wedding Rings Line from Schedule A/B. 12.1	\$750.00		\$750.00	RSMo § 513.430.1(2)
	Line Holl Schedule PAB. 12.1			100% of fair market value, up to any applicable statutory limit	
	Costume Jewelry Line from Schedule A/B. 12.2	\$20.00		\$20.00	RSMo § 513.430.1(2)
	LINE HOLL SCHEUUIE PAB. 12.2			100% of fair market value, up to any applicable statutory limit	
	Cash on hand Line from Schedule A/B. 16.1	\$25.00		\$25.00	RSMo § 513.430.1(3)
	Line Holl Schedule PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	at County Bank Line from Schedule A/B 17.1	\$1,000.00		\$1,000.00	RSMo § 513.430.1(3)
	Line non schedule ALL 11.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 No			on or after the date of adjustment.)	
	☐ Yes. Did you acquire the property covere ☐ No	d by the exemption within	n 1,21	5 days before you filed this case?	
	☐ Yes				

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Fill in this	information to identif	y your case:			
Debtor 1	James Lee Westo	on			
	First Name	Middle Name	Last Name		
Debtor 2	Kristina Ann Wes	ston			
(Spouse if, filing)	First Name	Middle Name	Last Name		
	kruptcy Court for the:	WESTERN DISTRICT (DIVISION	OF MISSOURI, JEFFERSOI	N CITY	
Case number					☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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	formation to identify you	ır case:				
Fill in this inf	ormation to lacitally you					
Debtor 1	James Lee Weste	on				
	First Name	Middle Name	Last Name	_	}	
Debtor 2	Kristina Ann Wes	ston				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT DIVISION	OF MISSOURI, JEF	FERSON CITY		
Case number						
(if known)		-				Check if this is an
					_ a	mended filing
N4: -: -!	400E/E					
Official Forr		// - 11 11				40/45
	E/F: Creditors W			Part 2 for creditors with NON		12/15
o: Creditors Who I he Continuation P ase number (if kn	Have Claims Secured by Pi Page to this page. If you ha	roperty. If more space is ne ve no information to report	eded, copy the Part yo	any creditors with partially s ou need, fill it out, number th hat Part. On the top of any ac	e entries in the	boxes on the left. Attach
	ors have priority unsecure					
No. Go to F						
— 140. GO to 1						
П у						
☐ Yes.						
	All of Your NONPRIORIT	Y Unsecured Claims				
Part 2: List A	All of Your NONPRIORIT					
Part 2: List A	ors have nonpriority unsec	cured claims against you?	ourt with your other sch	edules.		
Part 2: List A 3. Do any credito No. You ha		cured claims against you?	ourt with your other scho	edules.		
Part 2: List A	ors have nonpriority unsec	cured claims against you?	ourt with your other scho	edules.		
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai	ave nothing to report in this p ur nonpriority unsecured cl im, list the creditor separately	cured claims against you? art. Submit this form to the c aims in the alphabetical or y for each claim. For each cla	der of the creditor who	edules. • holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	aims already incl	uded in Part 1. If more
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credite	ave nothing to report in this p ur nonpriority unsecured cl im, list the creditor separately	cured claims against you? art. Submit this form to the c aims in the alphabetical or y for each claim. For each cla	der of the creditor who	o holds each claim. If a credit type of claim it is. Do not list cla	aims already incl	uded in Part 1. If more
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2.	ors have nonpriority unsectors have nothing to report in this purpose of the sector of the sec	cured claims against you? art. Submit this form to the claims in the alphabetical or a for each claim. For each claist the other creditors in Part	der of the creditor who aim listed, identify what to 3.If you have more than	o holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept	ave nothing to report in this p ur nonpriority unsecured cl im, list the creditor separately	cured claims against you? art. Submit this form to the claims in the alphabetical or a for each claim. For each claist the other creditors in Part	der of the creditor who	o holds each claim. If a credit type of claim it is. Do not list cla	aims already incl	uded in Part 1. If more Continuation Page of Part
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. Accept Nonpriorit	ave nothing to report in this par nonpriority unsecured clim, list the creditor separately itor holds a particular claim, list the Creditor's Name	cured claims against you? art. Submit this form to the claims in the alphabetical or y for each claim. For each claist the other creditors in Part Last 4 digitary.	der of the creditor who aim listed, identify what to 3.If you have more than	o holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clair than one credit 2. 4.1 Accept Nonpriorit	ave nothing to report in this part nonpriority unsecured clim, list the creditor separately itor holds a particular claim, list the Creditor's Name	cured claims against you? art. Submit this form to the claims in the alphabetical or y for each claim. For each claist the other creditors in Part Last 4 digitary.	der of the creditor who aim listed, identify what to 3.If you have more than ts of account number	o holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clair than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano,	ave nothing to report in this part nonpriority unsecured clim, list the creditor separately itor holds a particular claim, list creditor's Name tance Now ty Creditor's Name	art. Submit this form to the calms in the alphabetical or y for each claim. For each claist the other creditors in Part Last 4 digitations with the calms and the calms are calms.	der of the creditor who aim listed, identify what to all f you have more than to of account number the debt incurred?	b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl 3652 2019	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clair than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S	ave nothing to report in this part nonpriority unsecured clim, list the creditor separately itor holds a particular claim, list the Creditor's Name	art. Submit this form to the calms in the alphabetical or y for each claim. For each claist the other creditors in Part Last 4 digitations with the calms and the calms are calms.	der of the creditor who aim listed, identify what to all f you have more than to of account number the debt incurred?	o holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credite 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incur	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code urred the debt? Check one.	art. Submit this form to the calms in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was	der of the creditor who aim listed, identify what it 3.If you have more than ts of account number the debt incurred?	b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl 3652 2019	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incu	tors have nonpriority unsecured claim, list the creditor separately iter holds a particular claim, list the Creditor separately iter holds a particular claim, list the Creditor's Name ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code curred the debt? Check one. or 1 only	art. Submit this form to the calms in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was As of the calms.	der of the creditor who aim listed, identify what is 3. If you have more than ts of account number the debt incurred?	b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl 3652 2019	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clair than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incu	tors have nonpriority unsecured clave nothing to report in this pur nonpriority unsecured claim, list the creditor separately itor holds a particular claim, list the Creditor's Name tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code curred the debt? Check one. or 1 only or 2 only	art. Submit this form to the calims in the alphabetical or y for each claim. For each claist the other creditors in Part Last 4 digitation when was As of the calims and the conting Unliquid	der of the creditor who aim listed, identify what a 3.lf you have more than ts of account number the debt incurred?	b holds each claim. If a credit type of claim it is. Do not list cla three nonpriority unsecured cl 3652 2019	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clait than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incu	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	art. Submit this form to the calms in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was As of the calm Conting Unliquid Dispute	der of the creditor who aim listed, identify what to all steel and a second number the debt incurred? Idate you file, the claim lent dated d	b holds each claim. If a credit type of claim it is. Do not list clain three nonpriority unsecured classes and three nonpriority unsecured classes. 3652 2019 is: Check all that apply	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incu	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code surred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and and	art. Submit this form to the calms in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was As of the calm conting Unliquic Dispute other Type of No.	der of the creditor who aim listed, identify what it 3.lf you have more than ts of account number the debt incurred? Idate you file, the claim lent dated do DNPRIORITY unsecure	b holds each claim. If a credit type of claim it is. Do not list clain three nonpriority unsecured classes and three nonpriority unsecured classes. 3652 2019 is: Check all that apply	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incumary Debtor Debtor At least	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code urred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only	art. Submit this form to the calims in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was As of the calim Conting Unliquid Dispute other Type of Note and Conting Student Student	der of the creditor who aim listed, identify what is 3. If you have more than the debt incurred? Idate you file, the claim lent dated do DNPRIORITY unsecured to loans	b holds each claim. If a credit type of claim it is. Do not list clain three nonpriority unsecured claim: 3652 2019 is: Check all that apply	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incut Debtot At least Check debt	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code surred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and and	art. Submit this form to the calims in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was Conting Unliquid Dispute other Type of Normality Student Obligati	der of the creditor who aim listed, identify what is 3. If you have more than the debt incurred? Idate you file, the claim lent dated do DNPRIORITY unsecured to loans	b holds each claim. If a credit type of claim it is. Do not list clain three nonpriority unsecured classes and three nonpriority unsecured classes. 3652 2019 is: Check all that apply	aims already incl	uded in Part 1. If more Continuation Page of Part Total claim
Part 2: List A 3. Do any credite No. You ha Yes. 4. List all of you unsecured clai than one credit 2. 4.1 Accept Nonpriorit 5501 He Plano, Number S Who incut Debtot At least Check debt	tance Now ty Creditor's Name leadquarters Dr TX 75024-5837 Street City State Zip Code surred the debt? Check one. or 1 only or 2 only st one of the debtors and and k if this claim is for a comi	art. Submit this form to the calims in the alphabetical or y for each claim. For each claim the other creditors in Part Last 4 digitation when was As of the calim Conting Unliquid Dispute other Type of Note that Type of Note that Colligation as possible controls as present the colligation of the calimate of the cali	der of the creditor who aim listed, identify what is 3. If you have more than the debt incurred? In the debt incurred? In the claim dent detection of the debt incurred? In the claim dent detection of the debt incurred detection of the claim one arising out of a separatority claims	b holds each claim. If a credit type of claim it is. Do not list clain three nonpriority unsecured claim: 3652 2019 is: Check all that apply	aims already incl laims fill out the (uded in Part 1. If more Continuation Page of Part Total claim

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Debte Debte		ristina Ann	Case number (f known)	
4.2	Amazon Nonpriority Creditor's Name	Last 4 digits of account number	6741	\$500.00
	Nonphonty Creditor's Name	When was the debt incurred?	2017	
	PO Box 965015 Orlando, FL 32896-5015	_		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	American First Finance	Last 4 digits of account number	5277	\$1,000.00
	Nonpriority Creditor's Name			. ,
	3515 N Ridge Rd Ste 200 Wichita, KS 67205-1206	When was the debt incurred?	2018	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.4	AT&T	Last 4 digits of account number	0072	\$250.00
	Nonpriority Creditor's Name	_		,
	Attn: Bankruptcy 208 S Akard St Dallas, TX 75202-4295	When was the debt incurred?	2017	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	Other. Specify		

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Debto Debto		stina Ann	Case number (f known)		
1.5	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	4586	\$450.00	
	Nonpriority Creditor's Name	When was the debt incurred?	2017		
	PO Box 8803				
	Wilmington, DE 19899-8803 Number Street City State Zip Code	As of the date you file, the claim			
	Who incurred the debt? Check one.	As of the date you me, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other. Specify			
.6	Belk/SYNCB	Last 4 digits of account number	0642	\$130.00	
	Nonpriority Creditor's Name			¥13333	
	PO Box 965028	When was the debt incurred?	2017		
	Orlando, FL 32896-5028				
	Number Street City State Zip Code	As of the date you file, the claim			
	Who incurred the debt? Check one.				
	Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:		
	☐ Check if this claim is for a community debt	_	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?				
	■ No	Debts to pension or profit-sharing			
	Yes	Other. Specify			
.7	Boone Convenient Care	Last 4 digits of account number	9750	\$220.00	
	Nonpriority Creditor's Name	MI			
	601 Business Loop 70 W Suite 275 Columbia, MO 65203	When was the debt incurred?	2017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	П			
	Debtor 2 only	Contingent			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated			
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans			
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	<u> </u>		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐Yes	Other. Specify			

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Debto Debto		ristina Ann	Case number (if known)	
4.8	Boyce & Bynum Nonpriority Creditor's Name	Last 4 digits of account number	5724	\$80.00
	Nonpholity Creditor 3 Name	When was the debt incurred?	2016	
	PO Box 7406 Columbia, MO 65205-7406			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.9	Capital One Bank	Last 4 digits of account number	3481	\$565.00
	Nonpriority Creditor's Name			*
	PO Box 30281	When was the debt incurred?	2017	
	Salt Lake City, UT 84130-0281			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	_	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	Student loans	a claim:	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.10	CBNA	Last 4 digits of account number	0199	\$300.00
	Nonpriority Creditor's Name			Ψ000.00
	PO Box 6497	When was the debt incurred?	2017	
	Sioux Falls, SD 57117-6497 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	• ,	,	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar dobte	
	■ No	<u> </u>	y pians, and other similal debts	
	☐ Yes	Other. Specify		

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Debto Debto	r 1 _{r 2} Weston, James Lee & Weston, Kr	ristina Ann	Case number (if known)	
4.11	Celtic Card Services Nonpriority Creditor's Name	Last 4 digits of account number	6412	\$600.00
	Nonpholity Greator's Name	When was the debt incurred?	2017	
	268 S State St Ste 300 Salt Lake City, UT 84111-5314			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.12	Central Bank	Last 4 digits of account number	2479	\$4,350.00
	Nonpriority Creditor's Name	- When we the debt in some do		. ,
	PO Box 779	When was the debt incurred?	2017	
	Jefferson City, MO 65102-0779			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	l alaim.	
	At least one of the debtors and another	Student loans	i Claiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.13	Central Missouri Dermatology	Last 4 digits of account number	0075	\$450.00
	Nonpriority Creditor's Name	When we the debt incurred?	2017	
	401 N Keene St Columbia, MO 65201-6625	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	■ No □ Yes		g p.a, and outer similar dobte	
	TeS Te	Other. Specify		

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Debto Debto		ristina Ann	Case number (f known)		
4.14	ConServe Nonpriority Creditor's Name	Last 4 digits of account number	5312	\$1,445.00	
	Nonpholity Creditor's Name	When was the debt incurred?	2017		
	200 Cross Keys Office Park Fairport, NY 14450-3510	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only				
	Debtor 2 only	Contingent			
	_	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	l alaim.		
	☐ At least one of the debtors and another	Student loans	a ciaim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	a plane, and other similar debts		
	Yes	Other. Specify	g plans, and other similar debts		
4.15	Credit One Bank	Last 4 digits of account number	3421	\$1,050.00	
	Nonpriority Creditor's Name			<u> </u>	
	PO Box 98873	When was the debt incurred?	2017		
	Las Vegas, NV 89193-8873	PO Box 98873 Las Vegas, NV 89193-8873			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	_	□ Debtor 1 only □ Contingent			
	Debtor 2 only	r 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	\square Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.16	Dish Network	Last 4 digits of account number	0067	\$300.00	
	Nonpriority Creditor's Name	When was the debt incurred?	2017		
	9601 S Meridian Blvd Englewood, CO 80112-5905				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
		incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only □ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
			g p.as, and onto ominar dobto		
	Yes	Other. Specify			

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Debto Debto		ristina Ann	Case number (f known)	
4.17	ECMC	Last 4 digits of account number	0562	\$8,040.00
	Nonpriority Creditor's Name	- When we the debt in surred 0	0047	. ,
	PO Box 16408 Saint Paul, MN 55116-0408 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	2017 is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.18	Fingerhut	Last 4 digits of account number	3077	\$425.00
	Nonpriority Creditor's Name	- When we the debt in surred 0	0047	
	6250 Ridgewood Rd Saint Cloud, MN 56303-0820	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.19	Gap/SYNCB Nonpriority Creditor's Name	Last 4 digits of account number	5321	\$330.00
	rionphony orositor or tame	When was the debt incurred?	2017	
	PO Box 965005 Orlando, FL 32896-5005	_		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
		☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim Type of NONPRIORITY unsecured claim		d claim:	
	The location of the debters and another		a oranii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other. Specify		
	— · - •	- Other. Opeony		

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Debto Debto		ristina Ann	Case number (f known)	
4.20	Goody's Nonpriority Creditor's Name	Last 4 digits of account number	2489	\$300.00
	Nonpholity Greator's Name	When was the debt incurred?	2017	
	PO Box 182789			
	Columbus, OH 43218-2789 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.21	Healthport	Last 4 digits of account number	3079	\$50.00
	Nonpriority Creditor's Name	- When we the debt in some do	0017	
	925 N Point Pkwy Ste 350 Alpharetta, GA 30005-5214	When was the debt incurred?	2017	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify		
4.22	Indigo	Last 4 digits of account number	3462	\$350.00
	Nonpriority Creditor's Name	_		*
	PO Box 4499 Beaverton, OR 97076-4499	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify	5	
	103	 Other. Specify 		

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JC Penney	Last 4 digits of account number	8719	\$125.
Nonpriority Creditor's Name	-		V.20.
PO Box 965007	When was the debt incurred?	2017	
Orlando, FL 32896-5007			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent		
	☐ Unliquidated		
	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Jefferson Bank of Missouri Nonpriority Creditor's Name	Last 4 digits of account number	0609	\$33,585
. , . ,	When was the debt incurred?	2016	
700 Southwest Blvd			
Jefferson City, MO 65109-2660 Number Street City State Zip Code	_ As of the date you file, the claim	is. Chock all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim		
Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
•	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt	_	and the second s	
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify		
Jefferson Capital Systems	Last 4 digits of account number	3019	\$675
Nonpriority Creditor's Name			φοιο
DO D	When was the debt incurred?	2017	
PO Box 7999 Saint Cloud, MN 56302-7999			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	-		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐Yes	Other Specify		

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Debto Debto	r 1 _{r 2} Weston, James Lee & Weston, Kr	ristina Ann	Case number (f known)	
4.26	JH Portfolio Debt Equities Nonpriority Creditor's Name	Last 4 digits of account number	0872	\$500.00
	Nonpholity Creditor's Name	When was the debt incurred?	2017	
	5757 Phantom Dr Ste 225 Hazelwood, MO 63042-2429			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
	<u> </u>	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	I alaim.	
	☐ At least one of the debtors and another	Student loans	i ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	n plane, and other similar debts	
	☐ Yes	Other. Specify	g pians, and other similar debits	
4.27	Kohl's Nonpriority Creditor's Name	Last 4 digits of account number	3050	\$325.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017	
	PO Box 3115 Milwaukee, WI 53201-3115			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.28	LTD Commodities Nonpriority Creditor's Name	Last 4 digits of account number	5241	\$125.00
	2800 Lakeside Dr	When was the debt incurred?	2016	
	Deerfield, IL 60015-1246 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	Other. Specify		

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Macy's	Last 4 digits of account number	3652	\$150.
Nonpriority Creditor's Name	_		Ψ100.
DO Boy 9249	When was the debt incurred?	2017	
PO Box 8218 Mason, OH 45040-8218			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Maurices	Last 4 digits of account number	3084	\$250.
Nonpriority Creditor's Name			Ψ200.
	When was the debt incurred?	2017	
PO Box 182125 Columbus, OH 43218-2125			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	_	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	adion agreement or arrened that you are not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Merrick Bank	Last 4 digits of account number	0688	\$1,250
Nonpriority Creditor's Name			
PO Box 9201	When was the debt incurred?	2017	
Old Bethpage, NY 11804-9001			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	•	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other Specify		

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Mid Missouri Anesthesia			
Consultants	Last 4 digits of account number	0944	\$300.00
Nonpriority Creditor's Name	When was the debt incurred?	2017	
1445 Christy Dr Jefferson City, MO 65101-2853	when was the dest incurred:	2017	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Milestone Mastercard	Last 4 digits of account number	5411	\$550.00
Nonpriority Creditor's Name	When was the debt incurred?	2017	
PO Box 4477			
Beaverton, OR 97076-4401			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
•	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify		
Moberly Regional Medical Center	Last 4 digits of account number	9397	\$550.00
Nonpriority Creditor's Name	=		Ψ000.00
1515 Union Ave	When was the debt incurred?	2017	
Moberly, MO 65270-9407 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, 10 0, 1110 4410 , 041 1110, 1110 0141111	er chook an mat apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐Yes	Other. Specify		

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Debto Debto		istina Ann	Case number (if known)	
4.35	Montgomery Ward	Last 4 digits of account number	5111	\$500.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017	
	1112 7th Ave Monroe, WI 53566-1364 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.36	Nebraska Furniture Mart Nonpriority Creditor's Name	Last 4 digits of account number	0129	\$1,120.00
		When was the debt incurred?	2017	
	PO Box 3456 Omaha, NE 68103-0456 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify		
4.37	New Egg/SYNCB Nonpriority Creditor's Name	Last 4 digits of account number	0026	\$250.00
	Nonpholity Creditor's Name	When was the debt incurred?	2017	
	PO Box 965036 Orlando, FL 32896-5036	_		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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Debto Debto	weston, James Lee & Weston, Kris	stina Ann	Case number (f known)	
4.38	Noble Finance	Last 4 digits of account number	6255	\$625.00
	Nonpriority Creditor's Name			·
	1107 Business Loop 70 East	When was the debt incurred?	2016	
	Columbia, MO 65201 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	<u> </u>	g p.a, and outo. o	
	☐ Yes	Other. Specify		
4.39	Northeast Missouri Health Council	Last 4 digits of account number	5525	\$50.00
4.55	Nonpriority Creditor's Name	Last 4 digits of account number		\$50.00
		When was the debt incurred?	2017	
	1416 Crown Dr			
	Kirksville, MO 63501-2548 Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
	<u> </u>	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans		
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.40	Old Navy	Last 4 digits of account number	3472	\$200.00
	Nonpriority Creditor's Name			Ψ200.00
		When was the debt incurred?	2017	
	PO Box 965036			
	Orlando, FL 32896-5036 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,	от столож или орру	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	<u> </u>		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
		Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify		

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Debto Debto		ristina Ann	Case number (f known)			
4.41	PayPal Nonpriority Creditor's Name	Last 4 digits of account number	3812	\$300.00		
	Nonpholity Creditor's Name	When was the debt incurred?	2017			
	PO Box 965005 Orlando, FL 32896-5005					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.42	Portfolio Recovery Associates	Last 4 digits of account number	2119	\$7,950.00		
	Nonpriority Creditor's Name	- When we the debt in some do		. ,		
	120 Corporate Blvd Ste 100 Norfolk, VA 23502-4952	When was the debt incurred?	2017			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	<u></u> '	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community	_				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.43	Premier Bankcard	Last 4 digits of account number	3185	\$2,185.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2017	_		
	601 S Minesota Ave Sioux Falls, SD 57104	when was the dept incurred?	2017			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□Yes	Other. Specify				

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Debto Debto		istina Ann	Case number (f known)	
4.44	Progressive Leasing Nonpriority Creditor's Name	Last 4 digits of account number	3332	\$500.00
	Nonphonty Oreanor's Name	When was the debt incurred?	2016	
	256 W Data Dr Draper, UT 84020-2315 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	• ,	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.45	Security Finance Central Bankruptcy	Last 4 digits of account number	0791	\$2,230.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017	
	PO Box 1893	when was the dept incurred:	2017	
	Spartanburg, SC 29304-1893			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.46	Seventh Avenue	Last 4 digits of account number	9091	\$560.00
	Nonpriority Creditor's Name	When was the debt incurred?	2017	
	1515 21st St			
	Monroe, WI 53566-3047			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only			
	Debtor 2 only	Contingent		
	_	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt		reation company on diverse the transmitted of	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify		

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Debto Debto		ristina Ann	Case number (f known)			
4.47	Steven Jones DDS Nonpriority Creditor's Name	Last 4 digits of account number	0953	\$200.00		
	Nonphority Creator's Name	When was the debt incurred?	2015			
	108 Scenic Dr Glasgow, MO 65254-9431					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Continuent				
	Debtor 2 only	☐ Contingent				
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify				
4.48	Stoneberry	Last 4 digits of account number	9020	\$780.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2017			
	PO Box 2820	when was the dept incurred?	2017			
	Monroe, WI 53566-8020	_				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only					
	Debtor 2 only	Contingent				
	<u> </u>	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	l alaim.			
	☐ At least one of the debtors and another	Student loans	a Claim.			
	☐ Check if this claim is for a community debt	_	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	ration agreement of alvoice that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.49	TJ Max/SNYCB	Last 4 digits of account number	3033	\$350.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2017			
	PO Box 965005 Orlando, FL 32896-5005	THOM HAS ING ASSETTION.	2017			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	<u> </u>	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts			
	■ No	<u> </u>	y pians, and other similar debts			
	☐ Yes	Other. Specify				

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Tower Loan	Last 4 digits of account number	5277	\$1,750.0
Nonpriority Creditor's Name	When was the debt incurred?	2017	. ,
PO Box 320001	when was the dept incurred?	2017	
Flowood, MS 39232-0001			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
United Credit Union	Last 4 digits of account number	5279	\$15,680.0
Nonpriority Creditor's Name	_		V 10,0001
DO Doy 050	When was the debt incurred?	2016	
PO Box 858 Mexico, MO 65265-0858			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
United Student Aid Funds, Inc.	Last 4 digits of account number	1710	\$13,210.0
Nonpriority Creditor's Name	_		•
PO Box 8961	When was the debt incurred?	2017	
Madison, WI 53708-8961			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other Specify		

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Debto Debto		ristina Ann	Case number (f known)		
4.53	University Hospital & Clinics Nonpriority Creditor's Name	Last 4 digits of account number	0500	\$1,600.00	
	Nonpriority Creditor's Name	When was the debt incurred?	2016		
	1 Hospital Dr Columbia, MO 65201-5276				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.54	VW Credit Nonpriority Creditor's Name	Last 4 digits of account number	7733	\$13,830.00	
	Nonpholity Creditor 3 Name	When was the debt incurred?	2017		
	PO Box 9013				
	Addison, TX 75001-9013 Number Street City State Zip Code	As of the date you file, the claim i	s. Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the dam's	3. Oncok all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	□Yes	Other. Specify			
4.55	Wal-Mart	Last 4 digits of account number	2256	\$0.00	
	Nonpriority Creditor's Name	_			
	PO Box 965024 Orlando, FL 32896-5024	When was the debt incurred?	2017		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify			

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West Creek Financial	Last 4 digits of account number	3077	\$900.0				
Nonpriority Creditor's Name			φοσοι				
DO Dov 5540	When was the debt incurred?	2018					
PO Box 5518 Glen Allen, VA 23058-5518							
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only							
Debtor 2 only	☐ Contingent☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
☐ Check if this claim is for a community							
debt	☐ Obligations arising out of a sep						
Is the claim subject to offset?	report as priority claims	aration agreement of averse that you did not					
No	Debts to pension or profit-shari	ng plans, and other similar debts					
Yes	Other. Specify						
World Finance	Last 4 digits of account number	2122	\$1,695.0				
Nonpriority Creditor's Name	When was the debt incurred?	2017					
PO Box 6429							
Greenville, SC 29606-6429							
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
■ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-shari	ng plans, and other similar debts					
Yes	Other. Specify						
t 3: List Others to Be Notified About a De	•						
se this page only if you have others to be notified trying to collect from you for a debt you owe to save more than one creditor for any of the debts tho tified for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency he	re. Similarly, if you				
ne and Address	On which entry in Part 1 or Part 2 did you	_					
Resources Inc.		Part 1: Creditors with Priority Unsecured Claims					
Box 1056 ie Bell, PA 19422-0287		Part 2: Creditors with Nonpriority Unsecured Cla	ims				
de Dell, FA 19422-0207	Last 4 digits of account number	9750					
ne and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?					
cket and Lee LLP	, ,	☐ Part 1: Creditors with Priority Unsecured Claims					
Box 3001		Part 2: Creditors with Nonpriority Unsecured Cla	ims				
alvern, PA 19355-0701	Last 4 digits of account number	3481					
ne and Address							
ne and Address valry Portfolio Services	On which entry in Part 1 or Part 2 did you Line 4.32 of (<i>Check one</i>):	\square list the original creditor? \square Part 1: Creditors with Priority Unsecured Claims					
0 Summit Lake Dr Ste 4A	`	Part 2: Creditors with Nonpriority Unsecured Claims					
Ihalla, NY 10595-2323		- Fait 2. Creditors with Nonphority Unsecured Cla	11115				
	Last 4 digits of account number	0944					
ne and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?					

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Debtor 1 Debtor 2 Weston, James Lee & West	on, Kristina Ann	Case number (if known)		
Clark L Jones 11 N 7th St Columbia, MO 65201-4423	Line <u>4.50</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Columbia, WO 03201-4423	Last 4 digits of account number	5277		
Name and Address Creditors Bankruptcy Service PO Box 800849 Dallas, TX 75380-0849	On which entry in Part 1 or Part 2 di Line 4.35 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5111		
Name and Address Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773-9635	On which entry in Part 1 or Part 2 di Line 4.52 of (Check one): Last 4 digits of account number			
Name and Address Kim G. Schwartzkopf 2600 Forum Blvd Ste A Columbia, MO 65203-6343	On which entry in Part 1 or Part 2 di Line 4.45 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 0791		
Name and Address MOHELA 633 Spirit Dr Chesterfield, MO 63005-1243	On which entry in Part 1 or Part 2 di Line 4.52 of (<i>Check one</i>): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1710		
Name and Address University Healthcare PO Box 807003 Kansas City, MO 64180-7003	On which entry in Part 1 or Part 2 di Line 4.53 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 0500		
Name and Address University Physicians PO Box 808945 Kansas City, MO 64180-8945	On which entry in Part 1 or Part 2 di Line 4.53 of (Check one): Last 4 digits of account number	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 0500		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	s ——	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	128,435.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	128,435.00

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Fill in thi	is information to identi	y your case:		
Debtor 1	James Lee West	on		
	First Name	Middle Name	Last Name)
Debtor 2	Kristina Ann Wes	ston		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT O	OF MISSOURI, JEFFERSON (CITY
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 RTO Rentals
PO Box 489
Paris, TN 38242-0489

State what the contract or lease is for
Lease/Purchase Agreement on Storage Shed

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		Docume	nt Page 52 o	f /3	
Fill in	this information to identif	y your case:			
Debtor 1	James Lee West	Middle Name	Last Name		
Debtor 2	Kristina Ann Wes	ston			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT (OF MISSOURI, JEFFER	SON CITY	
Case number					
(if known)					Check if this is an amended filing
Schedul Codebtors are are filing toget and number th	her, both are equally resp e entries in the boxes on	e also liable for any debto consible for supplying co the left. Attach the Additi	rrect information. If mo	complete and accurate as po ore space is needed, copy the . On the top of any Additional	Additional Page, fill it out,
•	if known). Answer every of have any codebtors? (If y	•	o not list either spouse as	a codebtor.	
■ No					
☐ Yes					
	the last 8 years, have you Idaho, Louisiana, Nevada,			? (Community property states and Wisconsin.)	and territories include Arizona,
■ No. Go	to line 3. d your spouse, former spou	se, or legal equivalent live w	rith you at the time?		
line 2 aga	in as a codebtor only if the hedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	your spouse is filing with you you have listed the creditor e Schedule D, Schedule E/F,	on Schedule D (Official Form
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The creditor to Check all schedules that a	o whom you owe the debt apply:
3.1				☐ Schedule D, line	
Nam	е			☐ Schedule E/F, line	
				☐ Schedule G, line	
Num City	ber Street	State	ZIP Code	_	
3.2				☐ Schedule D, line	
Nam	е			☐ Schedule E/F, line ☐ Schedule G, line	
Num City	ber Street	State	ZIP Code	_	

Fill	in this information to identify your ca	ise:							
Del	btor 1 James Lee \	Weston							
1	btor 2 Kristina Ann	Weston							
Uni	ited States Bankruptcy Court for the:	WESTERN DISTRIC	T OF MISSOURI, J	EFFERSON					
	se number nown)		-		☐ An ☐ A s		nt showin	ng postpetition o	chapter 13
0	fficial Form 106l				MM	1 / DD/ Y	YYY		
S	chedule I: Your Inco	ome							12/15
atta	use. If you are separated and your ch a separate sheet to this form. Containing Describe Employment Fill in your employment				case numb	er (if kno	own). An		
	information.		■ Employed	_			■ Employed		
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	☐ Not employed			☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Employer's name	Senior Servic County Inc.	ne Christian Fellowship of Columb			lumbia,		
	Occupation may include student o homemaker, if it applies.	r Employer's address	1121 East Bus Columbia, MC						
		How long employed to	here? <u>15 ye</u>	ars					
Pai	Give Details About Mon	thly Income							
	mate monthly income as of the da ss you are separated.	te you file this form. If y	ou have nothing to r	eport for any lin	e, write \$0 in	n the spa	ce. Includ	de your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this for		bine the information	for all employer	s for that pe	erson on t	he lines b	oelow. If you ne	eed more
					For Debto	or 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2. \$	4,1	10.00	\$	1,064.00	
3.	Estimate and list monthly overti	me pay.		3. +\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add line	e 2 + line 3.		4. \$	4,110	.00	\$	1,064.00	

Official Form 106l Schedule I: Your Income page 1

Debt Debt		Weston, James Lee & Weston, Kristina Ann	_	Ca	se numbei	r (if know	n)				
				F	or Debto	or 1			Debtor 2		
	Copy	y line 4 here	4.	\$	4	,110.0	0	\$	1,	064.00	- -
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$		506.0	0	\$		82.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$		0.0	0	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$		0.0	0	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.	\$		0.0	0	\$		0.00	_
	5e.	Insurance	5e.	\$		0.0	_	\$_		0.00	_
	5f.	Domestic support obligations	5f.	\$		0.0	_	\$_		0.00	_
	5g.	Union dues	5g.	\$		0.0	_	. <u>*</u> _		0.00	_
	5h.	Other deductions. Specify:	5h.+			0.0	_	+ \$_		0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		506.0	0_	\$		82.00	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3	,604.0	0_	\$		982.00	_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.0	0	\$		0.00	
	8b.	Interest and dividends	8b.	\$		0.0		\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.0		\$		0.00	-
	8d.	Unemployment compensation	8d.	\$	-	0.0	_	<u> </u>		0.00	_
	8e.	Social Security	8e.	\$	-	0.0		<u>\$</u> —		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.0	0	<u> </u>		0.00	-
	8g.	Pension or retirement income	— 8g.	\$		0.0	0	\$_		0.00	_
	8h.	Other monthly income. Specify:	8h.+	+ \$		0.0	0	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_		0.0	0	\$_		0.0	0
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		3,604	00 +	\$		982.00	= \$	4,586.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. μ		3,004	.00	Ψ-		702.00		4,300.00
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your de friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availfy:	ependen		,	,			dule J. 11.	+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain							es 12.	\$	4,586.00
13.	Do v	ou expect an increase or decrease within the year after you file this form?	?						L	Combin	ned y income
		No.									

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	ur case:			l		
Deb	tor 1	James Lee V	Veston			Chec	k if this is:	
1	tor 2	Kristina Ann					An amended filing A supplement show expenses as of the	ing postpetition chapter 13
` `		ruptcy Court for the:		ERN DISTRICT OF MISSO RSON CITY DIVISION	URI,	_	MM / DD / YYYY	———
	e number							
		orm 106J				J		
		J: Your I				 		12/1
info	ormation. If m		ded, attac	If two married people are th another sheet to this fo				
Par		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to							
	■ Yes. Doe	s Debtor 2 live in	n a separa	te household?				
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Housel	noldof Debtor	2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		3	Yes
					_			□ No
					Son		4	Yes
					Son		0	□ No
					Son		8	■ Yes □ No
								☐ Yes
3.	Do your exp	oenses include		No				_ 100
	•	f people other th d your depender	^{ian} ⊓	Yes				
exp	imate your ex		ur bankru	y Expenses optcy filing date unless yo is filed. If this is a supple				
valu		sistance and ha		overnment assistance if the dit on Schedule I: Your I			Your expe	enses
(0		,						
4.		or home ownersh ad any rent for the		ses for your residence. Industrial	clude first mortgage	4. \$		995.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's,	or renter's	insurance		4b. \$		20.00
	•	maintenance, re				4c. \$		0.00
		owner's associati				4d. \$		0.00
5.	Additional r	nortgage payme	nts for yo	ur residence, such as hom	ne equity loans	5. \$		0.00

Debtor 1 Debtor 2	Weston, James Lee & Weston, Kristina Ann	Case number (if known)	
. Utili	ties:		
6a.	Electricity, heat, natural gas	6a. \$	275.00
6b.	Water, sewer, garbage collection	6b. \$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	375.00
6d.	Other. Specify:	6d. \$	0.00
Foo	d and housekeeping supplies	7. \$	1,000.00
Chil	dcare and children's education costs	8. \$	650.00
Clot	hing, laundry, and dry cleaning	9. \$	120.00
. Pers	sonal care products and services	10. \$	100.00
. Med	lical and dental expenses	11. \$	80.00
	nsportation. Include gas, maintenance, bus or train fare.		400.00
	not include car payments.	12. \$	
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	ritable contributions and religious donations	14. \$	0.00
i. Insu			
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a. \$	70.00
	Health insurance	15b. \$	100.00
	Vehicle insurance	15c. \$	110.00
	Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	13d.	0.00
	cify: Personal property	16. \$	25.00
'. Inst	allment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not repo		0.00
ded	ucted from your pay on line 5, Schedule I, Your Income (Official Form 1	0 61). 18. \$	
	er payments you make to support others who do not live with you.	Φ	0.00
Spe	city: er real property expenses not included in lines 4 or 5 of this form or on	Schodulo I: Vour Incomo	
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20e. \$	0.00
	er: Specify:	21. +\$	0.00
. Ош			0.00
	culate your monthly expenses		
	Add lines 4 through 21.	 \$	4,500.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	6J-2 \$	
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	4,500.00
. Calo	culate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,586.00
23b	Copy your monthly expenses from line 22c above.	23b\$	4,500.00
	• •	·	-,
23c.	Subtract your monthly expenses from your monthly income.		00.00
	The result is your monthly net income.	23c. \\$	86.00
For e	You expect an increase or decrease in your expenses within the year aft example, do you expect to finish paying for your car loan within the year or do you experience fication to the terms of your mortgage?		or decrease because of
	lo.		
П			

Fill in this in	formation to identify y	our case:				
Debtor 1	James Lee West	on				
	First Name	Middle Name	Las	st Name		
Debtor 2	Kristina Ann We	ston				
(Spouse if, filing)	First Name	Middle Name	Las	st Name		
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT C	OF MISSOU	RI, JEFFERSON CITY		
Case number						
(if known)					☐ Check if this is an	
					amended filing	
		<u> </u>			_	
Official Forn	n 106Dec					
		an Individual	Dobt	or's Sabadulas		
Declarat	ion About a	an maividuai	Debt	or's Schedules	12	2/15
		1 4 11				
if two married pe	ople are filing together	, both are equally respons	sible for su	pplying correct information.		
obtaining money		n connection with a bankr		d schedules. Making a false stat can result in fines up to \$250,0	ement, concealing property, or 00, or imprisonment for up to 20	
Sign	n Below					
Did you pay	y or agree to pay some	one who is NOT an attorn	ey to help	you fill out bankruptcy forms?		
■ No						
— — — — N				August D	and man to a Battina Burna and Matin	
∐ Yes. N	lame of person				ankruptcy Petition Preparer's Notico ion, and Signature (Official Form 11	
				Declarati	on, and dignature (Omeian offin 11	٥)
•		that I have read the summ	nary and so	hedules filed with this declarati	on and	
that they are	true and correct.					
X /s/ Was	ston, James Lee		x	/s/ Weston, Kristina Ann		
	Lee Weston		— ^	Kristina Ann Weston		
	e of Debtor 1			Signature of Debtor 2		

Date March 5, 2020

Date March 5, 2020

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	Fill in this	s information to identi	fy your case:			
Debtor	1	James Lee Wes	ton			
		First Name	Middle Name	Last Name		
Debtor (Spouse i		Kristina Ann We	eston Middle Name	Lost Namo		
(Spouse i	r, filing)	First Name	міодіе нате	Last Name		
United	States Bai	nkruptcy Court for the:	WESTERN DISTRICT OF DIVISION	MISSOURI, JEFFERSOI	N CITY	
Case n	_					7 Check if this is an
(ii kilowii)						Check if this is an amended filing
State	ement	nd accurate as possib	Affairs for Individ	e filing together, both are	equally responsible for su	
		ore space is needed, a er every question.	attach a separate sheet to th	is form. On the top of an	y additional pages, write yo	our name and case numbe
Part 1:	Give D	etails About Your Ma	rital Status and Where You I	Lived Before		
1. Wh	nat is your	current marital statu	s?			
_						
_	Married					
	Not mar	ried				
2. Du	ring the la	ast 3 years, have you	ived anywhere other than w	here you live now?		
	No					
	No Var Lie	t all af the minera !;.	and in the least Owners. Do not in	and the state of t		
_	Yes. Lis	t all of the places you liv	ed in the last 3 years. Do not in	nclude where you live now.		
De	ebtor 1 Pri	ior Address:	Dates Debtor 1 I there	Debtor 2 Prior	Address:	Dates Debtor 2 lived there
	612 N Ce olumbia	dar Ct , MO 65202-6891	From-To: 08/2018 - 03/2 0	Same as Debte	or 1	Same as Debtor 1 From-To:
	nd territorion No Yes. Ma	es include Arizona, Cali	er live with a spouse or lega fornia, Idaho, Louisiana, Neva edule H: Your Codebtors (Office Income	ada, New Mexico, Puerto I		
4. Dic	d you have	e any income from em	ployment or from operating	a business during this y	ear or the two previous ca	lendar years?
Fill	in the tota	l amount of income you	received from all jobs and all ave income that you receive to	l businesses, including pa	rt-time activities.	,
	No					
		in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

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	otor 1 otor 2 W	eston, Jar	nes Lee &	Weston, Kristina Ann	Cas	e number (if known)		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
		y 1 of currei filed for bar	nt year until nkruptcy:	■ Wages, commissions, bonuses, tips	\$7,246.00	☐ Wages, com bonuses, tips	missions,	\$1,781.00
				☐ Operating a business		☐ Operating a	ousiness	
	r last calen nuary 1 to	dar year: December	31, 2019)	■ Wages, commissions, bonuses, tips	\$37,403.00	■ Wages, com bonuses, tips	missions,	\$3,512.00
				☐ Operating a business		Operating a	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$41,405.00	☐ Wages, com bonuses, tips	missions,	\$18,032.00
				☐ Operating a business		☐ Operating a	ousiness	
	☐ Yes.	Fill in the de	etails.	Debtor 1 Sources of income Describe below.	Gross income from each source	Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions
					(before deductions and exclusions)			and exclusions)
Pai	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for E	Bankruptcy			
6.	Are either No.	Neither De individual p	ebtor 1 nor Dorimarily for a	s debts primarily consumer lebtor 2 has primarily consu- personal, family, or household	mer debts. Consumer debts purpose."		S.C. § 101(8	3) as "incurred by an
		□ No.	Go to line 7	re you filed for bankruptcy, did 7.	you pay any creditor a total or	\$6,625 OF HIGHE?		
		□ _{Yes}	creditor. Do	each creditor to whom you paid o not include payments for dor o an attorney for this bankrupto	mestic support obligations, su			
		* Subject	to adjustment	on 4/01/22 and every 3 years	after that for cases filed on or	after the date of adj	ustment.	
	Yes.			r both have primarily consu- re you filed for bankruptcy, did		\$600 or more?		
		No.	Go to line 7	7 .				
		□ _{Yes}		each creditor to whom you paid or domestic support obligations otcy case.	•	,	•	
	Creditor	's Name and	d Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for

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	Weston, James Lee & Weston, K	Kristina Ann	Cas	e number (if known)		
7.	Within 1 year before you filed for bankruptcy Insiders include your relatives; any general partnewhich you are an officer, director, person in contribusiness you operate as a sole proprietor. 11 U.S.	ers; relatives of any gener rol, or owner of 20% or mo	al partners; partnership ore of their voting secu	os of which you are rities; and any mana	a general partr aging agent, inc	ner; corporations of cluding one for a
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment
3.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign		ments or transfer an	y property on acc	ount of a deb	t that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	this payment itor's name
Pa	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes.					
	No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the	e case
10	Case number Within 1 year before you filed for bankrupton	, was any of your prop	arty reposessed for	rooloood gornich	nd attached (ocizad or levied?
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below.		erty repossessed, for	reciosed, garnish	attached, s	seizea, or ieviea?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment becau		luding a bank or fina	ncial institution, s	et off any am	ounts from your
	■ No☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	e creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and		erty in the possessio	n of an assignee	or the benefit	of creditors, a
	■ No					
	☐ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupto ■ No	cy, did you give any gift	s with a total value o	f more than \$600	per person?	
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and					

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Page 61 of 73 Document Debtor 1 Weston, James Lee & Weston, Kristina Ann Case number (if known) Debtor 2 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Date of your Value of property Describe any insurance coverage for the loss how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of **Address** transferred transfer was payment Email or website address made Person Who Made the Payment, if Not You **Baehr Wiggins PC Attorney Fees** \$1,000.00 1900 N Providence Rd # 205 Columbia, MO 65202-3710 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of Address transferred transfer was payment made transferred in the ordinary course of your business or financial affairs?

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

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Deb	101 2			Outo mun		
	beneficiary? (These are often called asset-prote	action devices \				
	No	cuon devices.)				
	☐ Yes. Fill in the details.					
	Name of trust	Description and va	alue of the pro	perty trans	ferred	Date Transfer was made
Part	t 8: List of Certain Financial Accounts, Insti	ruments Safe Denosit F	Roves and Sto	rane I Inite		
		· · · · · ·		_		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial account	s; certificates	of deposit;		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for I	oankruptcy, an	y safe dep	osit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, Stand ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your I	nome within 1	year before	you filed for bankrupt	cy?
	No					
	Yes. Fill in the details.	Who also has an h		Dagarika	the contents	Da waw atili
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St and ZIP Code)		Describe	the contents	Do you still have it?
Part	19: Identify Property You Hold or Control for	or Someone Fise				
	Do you hold or control any property that som someone.	eone else owns? Includ	de any propert	y you borro	owed from, are storing	for, or hold in trust for
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Part	10: Give Details About Environmental Infor	mation				
or t	he purpose of Part 10, the following definition	se anniv:				
JI L	he purpose of Part 10, the following definition	ιο αμμιγ.				
	Environmental law means any federal, state, of	_		• .	•	

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1

Case 20-20181-drd7 Doc 1 Filed 03/12/20 Entered 03/12/20 12:46:57 Page 63 of 73 Document Debtor 1 Weston, James Lee & Weston, Kristina Ann Case number (if known) Debtor 2 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. П Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No П Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Weston, James Lee/s/ Weston, Kristina AnnJames Lee WestonKristina Ann WestonSignature of Debtor 1Signature of Debtor 2

Date March 5, 2020 Date March 5, 2020

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Debtor 1 Debtor 2	Weston, James Lee & Weston, Kristina Ann	Case number (if known)			
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No □ Yes					
Did you pa ■ No	y or agree to pay someone who is not an attorney to help you fill out bar	kruptcy forms?			
☐ Yes. Na	me of Person Attach the Bankruptcy Petition Preparer's Notice, Declar	ation, and Signature (Official Form 119).			

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Fill in th				
Debtor 1	James Lee West	ON Middle Name	Last Name	
Debtor 2	Kristina Ann Wes	ston		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT (OF MISSOURI, JEFFERSON CITY	
Case number _				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property
	secures a dept?	as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

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Debtor 1 Debtor 2	/eston, James Lee & Weston, Kri	stina Ann Case numb	Der (if known)
name: Descriptior property securing de		 □ Retain the property and redeem it. □ Retain the property and enter into a Real Agreement. □ Retain the property and [explain]: 	☐ Yes eaffirmation
or any unex he information	on below. Do not list real estate leases	eases I listed in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 365	ct; the lease period has not yet ended. You
Describe you	ur unexpired personal property leases		Will the lease be assumed?
Lessor's name	e: RTO Rentals		■ No
			☐ Yes
Description of Property:	leased Lease/Purchase Agreen	nent on Storage Shed	
Part 3: Sig	n Below		
	y of perjury, I declare that I have indica is subject to an unexpired lease.	ated my intention about any property of my estat	e that secures a debt and any personal
X /s/ Wes	ston, James Lee	X /s/ Weston, Kristina	Ann
	Lee Weston	Kristina Ann Weston	
Signatur	re of Debtor 1	Signature of Debtor 2	
Date	March 5, 2020	Date March 5, 2020	

Debtor 1	James Lee Weston		122A-1Supp:
Debtor 2 (Spouse, if filing)	Kristina Ann Westo	n	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the:		Western District of Missouri, Jefferson City Division	☐ 2. The calculation to determine if a pres applies will be made under Chapter 7 Calculation (Official Form 122A-2).
Case number (if known)			☐ 3. The Means Test does not apply now b military service but it could apply later
			☐ Check if this is an amended filing
Official F	orm 122A - 1		
Chapter	7 Statement of	f Your Current Monthly	Income

as directed in this form and in Form o presumption of abuse ation to determine if a presumption of abuse ill be made underChapter 7 Means Test on (Official Form 122A-2). s Test does not apply now because of qualified

Column B

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: **Calculate Your Current Monthly Income**

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Debt		 or 2 or filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	nd co	mmissioı	ns (before all	\$	4,110.00	\$ 1,064.00
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				\$	0.00	\$ 0.00
4.	All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household, y roommates. Include regular contributions from a spouse Do not include payments you listed on line 3	Include our de	e regular pendents	contributions , parents, and	· \$	0.00	\$ 0.00
5.	Net income from operating a business, profession, o	r farm					
			Deb	otor 1			
	Gross receipts (before all deductions)	\$_	0.00				
	Ordinary and necessary operating expenses	-\$_	0.00				
	Net monthly income from a business, profession, or farr	n \$	0.00	Copy here ->	\$	0.00	\$ 0.00
6.	Net income from rental and other real property		_				_
			Deb	otor 1			
	Gross receipts (before all deductions)	\$	0.00				
	Ordinary and necessary operating expenses	-\$	0.00				
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$ 0.00
7.	Interest, dividends, and royalties				\$	0.00	\$ 0.00

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			Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation		\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit unde	r the			
	For you \$ For your spouse \$	0.00				
	For your spouse \$	0.00				
	Pension or retirement income. Do not include any amounder the Social Security Act. Also, except as stated in the include any compensation, pension, pay, annuity, or allows Government in connection with a disability, combat-related a member of the uniformed services. If you received any refer to title 10, then include that pay only to the extent that it of retired pay to which you would otherwise be entitled if retitle 10 other than chapter 61 of that title.	e next sentence, do not ance paid by the United St d injury or disability, or dea etired pay paid under chap t does not exceed the amo	ates th of ter unt	0.00	\$	0.00
	Income from all other sources not listed above. Spec	ify the source and amoun	t. Do			
	not include any benefits received under the Social Security victim of a war crime, a crime against humanity, or internated compensation, pension, pay, annuity, or allowance paid by Government in connection with a disability, combat-related a member of the uniformed services. If necessary, list other and put the total below.	y Act; payments received a tional or domestic terrorisr y the United States d injury or disability, or dea	as a n; or th of oage		œ.	
	·		\$	0.00	\$	0.00
			\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+ \$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		4,110.00	+ -	1,064.00	Total current monthly income
Part	2: Determine Whether the Means Test Applies to	You				
12.	Calculate your current monthly income for the year.	Follow these steps:				
	Calculate your current monthly income for the year. 12a. Copy your total current monthly income from line 1	·	Сор	y line 11 h	nere=>	\$5,174.00
	•	·	Сор	y line 11 ł	nere=>	x 12
	12a. Copy your total current monthly income from line 1	1	Сор	y line 11 ł	nere=> 12b.	x 12
	12a. Copy your total current monthly income from line 1. Multiply by 12 (the number of months in a year)	1 form	Сор	y line 11 ł		x 12
	12a. Copy your total current monthly income from line 1. Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the f	1 form	Сор	y line 11 ł		x 12
	12a. Copy your total current monthly income from line 1. Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the f Calculate the median family income that applies to ye	ou. Follow these steps:	Сор	y line 11 ł		x 12
13.	12a. Copy your total current monthly income from line 1. Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the f Calculate the median family income that applies to ye Fill in the state in which you live.	form ou. Follow these steps: MO 5 of household. online using the link specification.			12b. 13.	x 12
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Debtor 1 Debtor 2	Weston, James Lee & Weston, Kristina Ann		Case number (if known)	
Dat	e March 5, 2020	Date	March 5, 2020	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this t	form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.